

# BAKER BOTTS LLP

THE WARNER  
1299 PENNSYLVANIA AVE., NW  
WASHINGTON, DC  
20004-2400  
202.639.7700  
FAX 202.639.7890

AUSTIN  
BAKU  
DALLAS  
HOUSTON  
LONDON  
MOSCOW  
NEW YORK  
RIYADH  
WASHINGTON

10/601675 06/24/03



June 24, 2003

## UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket Number: 016354.0200

First Named Inventor: John Baranowski

Title: Control Systems And Methods Of Dispensing Items

TO: **BOX PATENT APPLICATION**  
Commissioner for Patents  
Washington, D.C. 20231

Sir:

Attached are the following for filing with the U.S. Patent and Trademark Office:

1.  Fee Transmittal Form
2.  Specification - Total Pages: 36 (Including Abstract)

CLAIMS AS FILED						
	Claims Filed	Basic Fee Claims	Extra	Rate		Amount
				Large Entity	Small Entity	
Total Claims	55	20	35	\$ 18.00	\$ 9.00	\$630.00
Independent Claims	3	3	0	\$ 84.00	\$ 42.00	\$ 0.00
First Presentation of Multiple Dependent Claims				\$ 280.00	\$ 140.00	\$ 0.00
<b>BASIC FEE</b>				\$ 750.00	\$ 375.00	\$ 750.00
<b>TOTAL FILING FEE</b>						\$1380.00

3.  Drawings - Total Sheets: 9 (Fig(s). 1-7)
4. Oath or Declaration - Total Pages: 2
  - a.  Newly executed (original or copy)  
 New (unexecuted)
  - b.  Copy from a prior application  
(for continuation/divisional with Box 17 completed)
    - i.  DELETION OF INVENTOR(s):  
Signed statement attached deleting inventor(s) named in prior application.
5.  Incorporation By Reference (useable if Box 4b is marked)

The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

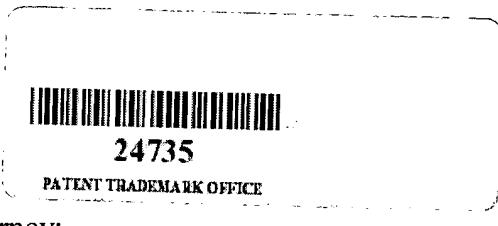
6.  Microfiche Computer Program (Appendix)
7.  Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  
a.  Computer Readable Copy  
b.  Paper Copy (identical to computer copy)  
c.  Statement verifying identity of above copies
8.  Assignment and Assignment Recordation Form
9.  37 C.F.R. 3.73(b) Statement  Power of Attorney
10.  English Translation Document (if applicable)
11.  Information Disclosure Statement with PTO-1449 and References  
 Copies of Information Disclosure Statement Citations
12.  Preliminary Amendment
13.  Return Receipt Postcard
14.  Small Entity Statement(s)  Independent Inventor  
 Small Business Concern  
 Non-Profit Organization  
 Statement Filed in Prior Application; Status Still Proper and Desired
15.  Foreign Priority is Claimed as Follows:  
\_\_\_\_\_  
\_\_\_\_\_
- If Foreign Priority is Claimed, Certified Copy of the Above Priority Document(s) is Submitted Herewith
16.  Other: Application Data Sheet \_\_\_\_\_
17.  Continuation  Divisional  Continuation-in-Part of  
Prior Application No.: \_\_\_\_\_ filed \_\_\_\_\_  
 Complete Application Based on Provisional Application No.: 60/454,645  
filed March 17, 2003 \_\_\_\_\_

Commissioner for Patents

June 24, 2003

Page 3

18.  A new power of attorney or authorization of agent (PTO/SB/81) is as follows:

- The power of attorney is to: 

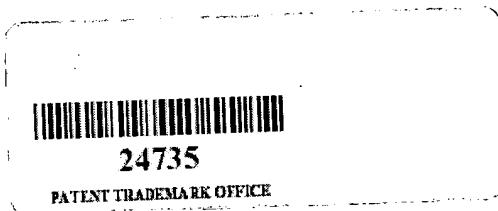


24735

PATENT TRADEMARK OFFICE

- Please remove as power of attorney:

- Please add as power of attorney:

19. Please address all correspondence to: 



24735

PATENT TRADEMARK OFFICE

20.  A check in the amount of \$ 1380.00 is enclosed. In the event any variance exists between the amount enclosed and the Patent Office charges, please charge or credit any such variance to Deposit Account No. 02-0375.

- The Commissioner is hereby authorized to charge any variance between the amount enclosed and the Patent Office charges to Deposit Account No. 02-0375.

Respectfully submitted,

By:

James B. Arpin  
Registration No 33,470

JBA/dh

Enclosures

18334 U.S. PTO  
06/24/03

		Complete If Known				
FEE TRANSMITTAL		Application No. To be assigned Filing Date June 24, 2003 First Named Inventor John Baranowski Examiner Name To be assigned Group Art Unit To be assigned				
Total Amount Of Payment (\$)		1380.00				
Attorney Docket No.		016354.0200				
<b>METHOD OF PAYMENT (check one)</b>		<b>FEE CALCULATION (continued)</b>				
1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to <b>Deposit Account No. 02-0375</b> in the name of Baker Botts L.L.P.  <input type="checkbox"/> Charge any additional fee required under 37 C.F.R. §§ 1.16 and 1.17 to <b>Deposit Account No. 02-0375</b> .		3. <b>ADDITIONAL FEES</b> Fee Description Fee Paid <input type="checkbox"/> Surcharge - late filing fee or oath \$ <input type="checkbox"/> Surcharge - late provisional filing fee or cover sheet \$ <input type="checkbox"/> Extension for reply with _____ month \$ <input type="checkbox"/> Notice of Appeal \$ <input type="checkbox"/> Filing Brief in Support of Appeal \$ <input type="checkbox"/> Request for Oral Hearing \$ <input type="checkbox"/> Utility Issue Fee (or reissue) \$ <input type="checkbox"/> Design Issue Fee \$ <input type="checkbox"/> Plant Issue Fee \$ <input type="checkbox"/> Petitions to Commissioner \$ <input type="checkbox"/> Petition to Revive (unavoidable) \$ <input type="checkbox"/> Petition to Revive (unintentional) \$ <input type="checkbox"/> Petitions Related to Provisional Applications \$ <input type="checkbox"/> Submission of Information Disclosure Statement \$ <input type="checkbox"/> Filing Submission After Final Rejection \$ <input type="checkbox"/> Recordation of Assignment Document \$ <input type="checkbox"/> Filing Request for Reexamination \$ <input type="checkbox"/> Other (specify) \$				
<b>FEES CALCULATION</b>						
1. <b>BASIC FILING FEE</b> <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity						
		<b>Fee Paid</b>				
Utility Filing Fee Design Filing Fee Plant Filing Fee Reissue Filing Fee Provisional Filing Fee		\$750.00 \$ \$ \$ \$				
<b>2. EXTRA CLAIMS FEES</b>						
<b>CLAIMS AS AMENDED</b>						
For	Number Present	Highest Number Paid For	Extra	Rate		Amount
				Large Entity	Small Entity	
TOTAL CLAIMS	55	20	35	x \$ 18.00	x \$ 9.00	\$630.00
INDEPENDENT CLAIMS	3	3	0	x \$ 84.00	x \$ 42.00	\$0.00
<b>MULTIPLE DEPENDENT CLAIMS</b>				\$ 280.00	\$ 140.00	\$0.00
<b>TOTAL EXTRA CLAIMS FEES</b>					\$630.00	
SUBMITTED BY				Complete (if applicable)		
Typed or Printed Name <u>James B. Arpin</u> Signature				Registration No.		33,470
				Date	06/24/03	Deposit Account User ID